DEPARTMENT OF HEALTH AND FAMILY SERVICES Division of Disability and Elder Services Printed 07/28/2006

Provider Inspection Summary

For the period 06/01/2003 to 05/31/2006 Community Based Residential Facility CLASS CNA (NONAMBULATORY) STATE OF WISCONSIN
Bureau of Quality Assurance
P.O. Box 2969
Madison WI 53701-2969

Facility Information

Facility Name: MAPLE DALE MANOR KEWASKUM II (310465) Address: 1042 FOND DU LAC AVE, KEWASKUM, WI 53040

License Status: REGULAR

Licensed/Certified/Registered 02/04/1994

Regional Office: SOUTHERN REGION (MADISON), (608) 243-2370

Survey History

Survey ID: 0093972 End Date: 01/11/2005 Type: STANDARD Purpose: SURVEY/COMPLAINT

Results: ENFORCEMENT ACTION

Statement of Deficiency: #10008098 Served 01/26/2005

Deficiencies Cited Subject Area Subject Area Subject Area Corrected

83.21(4)(w) SAFE ENVIRONMENT

83.41(5)(d)2 HOT WATER TEMPERATURES

Survey ID: 0090705 End Date: 06/24/2003 Type: STANDARD Purpose: SURVEY/COMPLAINT

Results: ENFORCEMENT ACTION

Statement of Deficiency: #10006870 Served 08/04/2003

		<u>Compliance</u>	
Deficiencies Cited	Subject Area	<u>Veri fied</u>	Corrected
83.07(10)(a)	ACTION BY DEPARTMENT TO ENFORCE CHAPTER	01/11/2005	Yes
83.21(4)(p)	PROMPT AND ADEQUATE TREATMENT	01/11/2005	Yes
83.21(4)(w)	SAFE ENVIRONMENT		
83.32(2)(a)2	ASSESSMENT OF MEDICATIONS TAKEN	01/11/2005	Yes
83.41(5)(d)2	HOT WATER TEMPERATURES		
83.42(3)(b)	EMERGENCY PLAN POSTED	01/11/2005	Yes
83.43(3)(b)2	TESTING OF SMOKE DETECTORS	01/11/2005	Yes

Disclaimer: This information is provided as a public service by the Wisconsin Department of Health and Family Services (DHFS). The Department neither endorses any facility nor guarantees that this information is accurate, up-to-date, or complete. This information, which should not be used as a sole source in selecting a facility, does not replace official information sources.

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Enforcement History

Date: 01/24/2005 SOD #10008098 Appealed: No

Sanctions

FORFEITURE---83.21(4)(w) FORFEITURE---83.41(5)(d)2

Date: 07/31/2003 SOD #10006870 Appealed: No

Sanctions

PROVIDE TRAINING FORFEITURE---83.07(10)(a)1 FORFEITURE---83.21(4)(p)

FORFEITURE---83.21(4)(w) 83.41(5)(d)2

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Complaint History

Date Complaint Received: 09/01/2004 Date Investigation Completed: 01/11/2005

Subject Area(s) Result

MEDICATIONS NOT SUBSTANTIATED